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Dated: January 20, 2004

Signature:

Marian L. Christopher
(Marian L. Christopher)

Docket No.: 388512010410
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:

Lawrence M. KAUVAR

Application No.: 10/713,234

Filed: November 13, 2003

For: PROTEIN LOCALIZATION ASSAYS FOR
TOXICITY AND ANTIDOTES THERETO

Art Unit: 1641

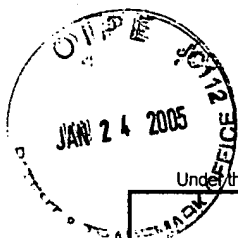
Examiner: N. Yang

AMENDMENT UNDER 37 C.F.R. § 1.116

MS AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

This is in response to an Office Action herein, mailed 3 November 2004, time for response to which was set to expire 3 February 2005. Claims 14-17, 19, 21-22 and 26-31 were rejected and the rejection was made final. Claims 23-25 were considered allowable if amended to contain the limitations of the claims from which they depend. With appreciation for the acknowledgement of allowability of claims 23-25, applicant wishes to respond to the rejection of the remaining claims. Reconsideration of that rejection is respectfully requested.



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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	10/713,234
		Filing Date	November 13, 2003
		First Named Inventor	Lawrence M. KAUVAR
		Art Unit	1641
		Examiner Name	N. Yang
Total Number of Pages in This Submission	7	Attorney Docket Number	388512010410

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply (6 pages) <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Receipt Postcard
<div>Remarks</div> <p>Customer No. 25225</p>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	MORRISON & FOERSTER LLP		
Signature			
Printed name	Kate H. Murashige		
Date	January 20, 2005	Reg. No.	29,959

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